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Bib Data Sheet

CONFIRMATION NO. 4920

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/511,718 | <b>FILING OR 371(c)<br/>DATE</b><br>07/28/2006<br><b>RULE</b> | <b>CLASS</b><br>424 | <b>GROUP ART UNIT</b><br>1645 | <b>ATTORNEY<br/>DOCKET NO.</b><br>9896-000053/NP |
|------------------------------------|---|---------------------|-------------------------------|--|

**APPLICANTS**

Jun Liu, Toronto, ON, CANADA;  
Jeffrey Chen, Toronto, ON, CANADA;  
David Alexander, Toronto, ON, CANADA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/CA03/00566 04/16/2003 which claims benefit of 60/372,450 04/16/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
**\*\* 08/08/2007**

|   |                                   |                                |                               |                                    |
|---|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no  | <b>STATE OR<br/>COUNTRY</b><br>ON | <b>SHEETS<br/>DRAWING</b><br>9 | <b>TOTAL<br/>CLAIMS</b><br>29 | <b>INDEPENDENT<br/>CLAIMS</b><br>9 |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                                   |                                |                               |                                    |
| Verified and<br>Acknowledged  | Examiner's Signature              | Initials                       |                               |                                    |

**ADDRESS**

27572

**TITLE**

TUBERCULOSIS VACCINES INCLUDING RECOMBINANT BCG STRAINS EXPRESSING ALANINE  
DEHYDROGENASE, SERINE DEHYDRATASE AND/OR GLUTAMINE SYNTHETASE

|  |   |   |
|--|---|---|
| <b>FILING FEE<br/>RECEIVED</b><br>2070 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                                 |
|  |   | <input type="checkbox"/> 1.16 Fees ( Filing )                     |
|  |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time ) |
|  |   | <input type="checkbox"/> 1.18 Fees ( Issue )                      |
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